B6 Summary (Official Form 6 - Summary) (12/07)

### United States Bankruptcy Court District of Nevada

In re William Fosth,		Case No.	09-26748
Collette Fosth			
	Debtors	Chapter	13

### **SUMMARY OF SCHEDULES - AMENDED**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	157,640.00		
B - Personal Property	Yes	3	42,835.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		393,202.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		58,506.85	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			4,418.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,934.00
Total Number of Sheets of ALL Schedu	ıles	18			
	To	otal Assets	200,475.00		
			Total Liabilities	451,708.85	

### United States Bankruptcy Court District of Nevada

In re	William Fosth,		Case No	09-26748
	Collette Fosth			
_		Debtors	Chapter	13

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	4,418.00
Average Expenses (from Schedule J, Line 18)	3,934.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,901.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		237,802.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		58,506.85
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		296,308.85

#### Case 09-26748-lbr Doc 15 Entered 09/16/09 17:22:01 Page 3 of 10

B6F (Official Form 6F) (12/07)

In re	William Fosth,		Case No.	09-26748	
	Collette Fosth				
_		Debtors			

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	С	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBT OR	J H M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGENT	UNLIQUIDA		AMOUNT OF CLAIM
Account No. <b>5584180011413971</b>			Opened 2/21/07 Last Active 11/01/08 BusinessCreditCard	T	D A T E D		
Advanta Bank Corp Po Box 844 Spring House, PA 19477		w					3,221.00
Account No. <b>174630002</b>			Opened 12/04/08 Last Active 1/01/09	+			3,221.00
Allied Collection Serv (Original Cr 3080 S Durango Dr Ste 20 Las Vegas, NV 89117		w	Collection Medical District Surgery Cente				461.00
Account No. 174630001  Allied Collection Serv (Original Cr 3080 S Durango Dr Ste 20 Las Vegas, NV 89117		w	Opened 12/04/08 Last Active 1/01/09 Collection Medical District Surgery Cente				401.00
							371.00
Account No. 172222501  Allied Collection Serv (Original Cr 3080 S Durango Dr Ste 20 Las Vegas, NV 89117		w	Opened 10/08/08 Last Active 1/01/09 Collection Gregson Porteous Do				224.00
6 continuation sheets attached			(Total of	Sub			4,277.00

In re	William Fosth,	Case 1	No	09-26748
	Collette Fosth			

# Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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CREDITOR'S NAME,	CO	Hus	sband, Wife, Joint, or Community	<b>−</b> 6	N N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ОДШВНОК	エミっぃ	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT L NG E NT	111	T E	AMOUNT OF CLAIM
Account No. 3499913740341553			Opened 10/01/05 Last Active 9/01/08	٦т	T		
Amex P.O. Box 981537 El Paso, TX 79998		W	CreditCard		D		3,219.00
	L			$\perp$	┞		0,210.00
Account No. 3499915243965953			Opened 1/01/05 Last Active 9/01/08 CreditCard				
Amex P.O. Box 981537 El Paso, TX 79998		W					
							2,368.00
Account No. 517805731713			Opened 5/17/08 Last Active 12/01/08 CreditCard				·
Cap One Po Box 85520 Richmond, VA 23285		Н					
Account No. 1311							1,424.00
Cap One Pob 30281 Salt Lake City, UT 84130		С					024.00
Account No. <b>542270202856</b>	$\vdash$		Opened 5/13/98 Last Active 7/15/09	+	_		924.00
Chase Po Box 15298 Wilmington, DE 19850		С	CreditCard				13,103.00
							13,103.00
Sheet no. <u>1</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			21,038.00

In re	William Fosth,	Case No	09-26748
	Collette Fosth		

# Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

						_	
CREDITOR'S NAME,	C	Нι	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIGUIDATE	Ī	AMOUNT OF CLAIM
Account No. 418586483735			Opened 12/11/06 Last Active 12/01/08	Т	T		
Chase Po Box 15298 Wilmington, DE 19850		н	CreditCard		D		1,119.00
Account No. 436145870433			Opened 10/11/00 Last Active 11/01/08				
Chase Po Box 15298 Wilmington, DE 19850		w	CreditCard				928.00
Account No. 588896415038			Opened 4/10/07 Last Active 5/01/09				
Chase-Pier Po Box 15298 Wilmington, DE 19850		w	CreditCard				192.00
Account No. <b>780-00</b>							
GEMB Chevron		С					100.00
Account No.	Ͱ	$\vdash$	Pending Litigation	$\vdash$		$\vdash$	
Greenberg Trauig 3773 Howard Hughes Pkwy # 400N Las Vegas, NV 89169		С	T ending Enganon				Unknown
Sheet no. 2 of 6 sheets attached to Schedule of				Subt			2,339.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis :	pag	ge)	· · · · · · · · · · · · · · · · · · ·

In re	William Fosth,	Case 1	No	09-26748
	Collette Fosth			

# Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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CREDITOR'S NAME,	Ç	Ηι	usband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	UNLIGUIDATE	U T F	AMOUNT OF CLAIM
Account No.	ı			T	E		
Gregory Bryan DDS 10120 South Eastern Avenue Henderson, NV 89052		С			D		1,156.00
Account No.	H	T					
Gregson Porteous DO 501 South Rancho Dr.□□ Las Vegas, NV 89106		С					215.40
Account No. 4518	T						
Home Depot PO Box 689100 Des Moines, IA 50368		С					10,176.00
Account No. 5155930000170316	Г		Opened 10/20/05 Last Active 12/01/08				
Hsbc Bank Po Box 5253 Carol Stream, IL 60197		н	CreditCard				1,486.00
Account No. 5458001553469358			Opened 3/30/07 Last Active 12/01/08				
Hsbc Nv Po Box 5253 Carol Stream, IL 60197		Н	CreditCard				5,049.00
Sheet no. 3 of 6 sheets attached to Schedule of				Subt			18,082.40
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	10,002.40

In re	William Fosth,	Case 1	No	09-26748
	Collette Fosth			

# Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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CREDITOR'S NAME,	C O	1	sband, Wife, Joint, or Community		U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		エミっぃ	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG ENT	UNLIGUIDATE	Ţ	AMOUNT OF CLAIM
Account No. 343107519509741			Opened 7/01/07 Last Active 12/01/08	Т	T E		
Infibank 1620 Dodge St Omaha, NE 68197		Н	CreditCard		D		3,926.00
Account No.	H						
Kozmary Center for Pain Management 2851 El Camino Road Las Vegas, NV 89102		С					156.70
Account No. <b>4363332093520</b>			Opened 4/03/07 Last Active 8/15/09				
Macysdsnb 911 Duke Blvd Mason, OH 45040		W	ChargeAccount				165.00
Account No.	Н						
Mark Kabins MD 501 South Rancho Dr.□□ Las Vegas, NV 89106		С					474.00
Account No.	$\vdash$					$\vdash$	
Medical District Surgery Center 2020 Goldring Las Vegas, NV 89106		С					790.00
Sheet no4 of _6 sheets attached to Schedule of				Subt	ota	11	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				5,511.70

In re	William Fosth,	Case No	09-26748
	Collette Fosth		

# Debtors AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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CREDITOR'S NAME,	CODEBTOR	1 '	sband, Wife, Joint, or Community	CONT	N	D L C	
MAILING ADDRESS	E	H W	DATE CLAIM WAS INCURRED AND	T	L	I S P U T E	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	J	CONSIDERATION FOR CLAIM. IF CLAIM	11 1	Q J L	Į Ų	AMOUNT OF CLAIM
(See instructions above.)	0 0	c	IS SUBJECT TO SETOFF, SO STATE.	G	ĺ	E D	AMOUNT OF CLAIM
Account No.	K	┢		NGENT	D A T E	ال	
Account No.	ł				E D		
Opensided MRI of Las Vegas				П			
630 South Rancho	l	C					
Las Vegas, NV 89106	l						
	l						
							553.75
Account No.	T						
Control Book							
Orchard Bank	1						
1301 East tower Road	1	C					
Schaumburg, IL 60173	l						
							4 400 00
							1,100.00
Account No.	1						
BBS Anasthasia							
PBS Anesthesia 2635 Box Canyon	1	С					
Las Vegas, NV 89128	1	ĭ					
Las vegas, NV 03120	l						
							215.00
Account No.	╁	$\vdash$		$\vdash$			
	1						
Silver State Schools Credit Union	l						
POB 12037	1	С					
Las Vegas, NV 89112	1						
	l						
							4,185.00
Account No. 0658	T	T					
	1						
Washington Mutual	1						
1301 Second Avenue	1	C					
Seattle, WA 98101	1						
	1						
							435.00
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of				Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				6,488.75
Creations froming offsecured nonpriority Claims			(Total of t	1112	pag	,0)	

In re	William Fosth,	(	Case No	09-26748
	Collette Fosth			

### Debtors **AMENDED** SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

						-	
CREDITOR'S NAME,	0	Li	sband, Wife, Joint, or Community	0	N	Ī	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	G E	I D	E D	ANNOCAL OF CEASIN
Account No. 0345				T	T E		
	1				Ď		
Washington Mutual							
1301 Second Avenue Seattle, WA 98101		С					
Seattle, WA 90101							
							770.00
Account No.			Law Suit				
Wilde and Associates							
208 South Jones		С					
Las Vegas, NV 89107							
							Unknown
Account No.							
Account No.							
	1						
Account No.	T						
	1						
Sheet no. <b>_6</b> of <b>_6</b> sheets attached to Schedule of	_			L	Ote	1	
Sheet no. <u>6</u> of <u>6</u> sheets attached to Schedule of Subtotal Creditors Holding Unsecured Nonpriority Claims (Total of this page)							770.00
			(2341) 07 1		ota		
			(Report on Summary of Sc				58,506.85
			(F			-,	

B6 Declaration (Official Form 6 - Declaration). (12/07)

### **United States Bankruptcy Court District of Nevada**

In re	William Fosth Collette Fosth		Case No.	09-26748						
		Debtor(s)	Chapter	13						
DECLARATION CONCERNING DEBTOR'S SCHEDULES - AMENDED										

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date	September 16, 2009	Signature	/s/ William Fosth William Fosth Debtor	
Date	September 16, 2009	Signature	/s/ Collette Fosth	
		_	Collette Fosth	
			Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.